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Bib Data Sheet

CONFIRMATION NO. 5108

SERIAL NUMBER 10/828,931	FILING DATE 04/21/2004 RULE	CLASS 182	GROUP ART UNIT 3634	ATTORNEY DOCKET NO. BRIN:001A
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APPLICANTS

Daniel J. Brink, Quincy, IL;

** CONTINUING DATA *****
 This application is a CIP of 10/811,072 03/26/2004 ABN *cmr*

** FOREIGN APPLICATIONS *****
nm *cmr*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 06/26/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IL	SHEETS DRAWING 23	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
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Verified and Acknowledged
Colleen Quinn *cmr*
 Examiner's Signature Initials

ADDRESS
 Marc A. Rossi
 ROSSI & ASSOCIATES
 P.O. Box 826
 Ashburn, VA
 20146-0826

TITLE
 Folding platform structure

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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